MODULE 1: WELCOME

TIME: 30 Minutes

PURPOSE:

Module 1 provides participants with an overview of the workshop and gives them an opportunity to begin to develop a rapport with the trainers and with each other. This module also sets the tone for the entire workshop by identifying the goal of the workshop as well as reviewing the training materials, handouts, and logistical concerns.

LEARNING OBJECTIVES:

Upon completion of this module, participants will be able to:

- Review logistic and housekeeping information;
- Identify trainers and participants;
- Understand the purpose, objectives, agenda, ground rules, and underlying principles of the workshop, including: the paradigm shift that involves recognizing the new flexibility of service delivery options that can address individual and family's needs and preferences; and
- Incorporate into their practice achieving outcomes for children and adults.

MODULE AGENDA:

A.	Welcome	1 Minute
B.	Logistical and Housekeeping Information	2 Minutes
C.	Facilitator and Participant Identification	12 Minutes
D.	Discussion of Goals of Training	5 Minutes
E.	Identifying Needs Pre-test	10 Minutes

TRANSPARENCIES:

T-1.1: Training Agenda
T-1.2: Ground Rules
T-1.3: Training Goal

HANDOUTS:

H-1.1: Ground Rules
H-1.2: The Underlying Principles of This Training
H-1.3: Pre-Test

PREPARED NEWSPRINT:

- Welcome Sheet with Facilitators' Names;
- Training Agenda; and
- Parking Lot

ADDITIONAL SUPPLIES:

- Five to seven post-it or similar adhesive strip pads for the "Parking Lot" exercise;
- Blank tent cards;
- Sign-in sheet; and
- Flip chart/markers.

1 Minute

A. WELCOME

The Facilitator should welcome the participants to the training and acknowledge the time they are taking from their jobs to participate in the workshop. The Facilitator should note that this Workshop is an interagency technical assistance project that has been developed through collaboration between:
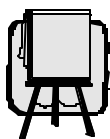
- The Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT); and
- The Arizona Department of Health Services (DHS), Division of Behavioral Health Services (DBHS).

Augmenting a series of trainings that ADHS/DBHS conducted for stakeholders in Fall of 2001, this training was developed for Arizona substance abuse treatment, mental health, co-occurring, and children service providers on how to access the State's Covered Behavioral Health Services.

2 Minutes

B. LOGISTICAL AND HOUSEKEEPING INFORMATION

The Facilitator should inform participants where to locate:

- Public telephones;
- Water fountains;
- Emergency exits;
- Telephone messages (at registration table);
- Assistance in adjusting the room temperature;
- Lunch or eating facilities; and
- Please turn your cell phones off.

C. FACILITATOR AND PARTICIPANT INTRODUCTIONS

12 Minutes

The Facilitator should turn to the prepared newsprint *Welcome Sheet with Facilitators' Names*. The Facilitator(s) should introduce themselves and then give each person a few seconds to share the following information:

- Name;
- Agency or organization; and
- Number of years working in the field.

Welcome Sheet and Agenda

Following participant introductions, the Facilitator should point out the vast amount of experience the participants bring to the workshop and tell them to feel free to share their experiences and expertise as the training progresses.

The Facilitator should refer to T-1.1: *Training Agenda* and discuss prepared newsprint *Training Agenda* that highlights the workshop agenda. After reviewing

T-1.1

the agenda, post the newsprint in a location easily seen by all participants. Also, the Facilitator should note that the training covers the following modules and topics:

- Module 1:   Welcome
- Module 2:   Assessing Individual Strengths and Needs
- Module 3:   Practicing Assessment- Case Study &Video
- Module 4:   Introduction to Covered Services
- Module 5:   Matching Strengths and Needs to Services
- Module 6:   Regional Service Availability

The Facilitator should show T-1.2: *Ground Rules* and handout H-1.1: *Ground Rules,* and make note of the following before the training begins:

- There are no right or wrong answers to any of the exercises. The matters discussed involve clinical judgments and not absolutes.
- The professional expertise for the day's exercises exists within the participants. In other words, the participants are the experts, not the Facilitator. The Facilitator's role is to structure the day and keep the exercises focused.
- All participants are expected to actually engage in the exercises in order to maximize learning.
- Ensure that participants have access to a pad of post-it type notes. Then, direct participants to the prepared newsprint and note that often during discussions, points and/or questions may come to mind that they would like to have addressed. So they will not forget their issue, please write a brief reminder on the post-it note pad provided. At any time during the course of the training, they may list issues or concerns in the "Parking Lot."

H-1.1
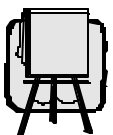
During the breaks, the Facilitator should move the specified items to the "Parking Lot" newsprint and encourage participants to add information and resources to the list. The Facilitator may also add resources and information to the prepared newsprint *Parking Lot* and should remember to glance at this sheet throughout the day. Make sure you have responded to all issues by the close of the day.

D. DISCUSSION OF GOALS OF TRAINING

Parking Lot

Then, the Facilitator should refer participants to T-1.3: *Training Goal*, and state that the goal of the training is to provide frontline behavioral health services providers* with the understanding of how to identify the strengths and needs of an individual and family and then match covered services and natural supports to their strengths and needs.

*Providers include paraprofessionals, behavioral health technicians, and behavioral health professionals.

T-1.3

The Facilitator should note that after completing this training participants will be able to:

- Identify strengths and needs of individuals and families;
- Use covered services to match individual and families' needs and strengths; and
- Be knowledgeable on how to access and create covered services locally.

This training will assist frontline providers in matching individual needs and strengths of individuals and families with available covered behavioral health services and other community supports. *This is NOT a training about how to write a treatment plan and determine billing codes. At the end of this training, you will have new skills involving individuals and families in their service planning.*

At this time facilitator should handout H-1.2: *The Underlying Principles of This Training*. These are the principles on which service provision should be based. The Facilitator will ask each table to spend 10 minutes reviewing the handouts and identifying and discussing which principles resonate most closely with their values.

E. IDENTIFYING NEEDS TEST

H-1.2

The Facilitator will handout H-1.3: *Pre-Test*, and ask each participant to spend 5 minutes independently identifying needs and strengths. When the exercise is complete, participants should place the paper in the back of their folder and it will be discussed late in the training.

10 Minutes

H-1.3

T-1.1: TRAINING PURPOSE

Purpose

This training is designed to:

- Augment a series of trainings that DBHS conducted for provider staff earlier this year;

- Ensure that clients receive a set of services that are specifically designed to meet their individual needs; and

- Assist frontline providers in matching individual needs with available covered behavioral health services and other community support.

T-1.2: Training Objectives

The major objectives of this training to are make participants more knowledgeable on how to:

- Better assess the individual needs of clients;

- Understand the definition and use of the covered services; and

- Access and/or develop covered services locally.

T-1.3: TRAINING AGENDA
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This training covers the following modules and topics:

Module 1:   Welcome

Module 2:   Client Needs

Module 3:   Practicing Assessment-Video

Module 4:   Practicing Assessment-Case Study

Module 5:   Introduction to Covered Services

Module 6:   Matching Needs to Services

Module 7:   Regional Service Availability

T-1.4: Ground Rules

During the training, participants should be aware of the following ground rules:

- There are no right or wrong answers to any of the exercises. The matters discussed involve clinical judgments and not absolutes.

- The professional expertise for the day's exercises exists within the participants. In other words, the participants are the experts, not the Facilitator. The Facilitator's role is to structure the day and keep the exercises focused.

- All participants are expected to actually engage in the exercises in order to maximize learning.

- Cell phones should be turned off except during breaks.

- For purposes of this training, covered services, ancillary services and wrap around services may be used interchangeably.

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H-1.2: Underlying Principles

The material being presented today is based on research and demonstrates how research can be put into practice. This training is based upon findings from the CSAT-sponsored Wrap Around Services Impact Study (WASIS). The major findings from WASIS include:

- Outpatient substance abuse treatment clients who reported receiving ancillary services were more likely to have superior retention and treatment outcomes than clients who did not receive ancillary services.

- The rates of ancillary service receipt reported by clients during the WASIS study period were low, and the level of service did not meet client need.

- Clients who had a great number of need indicators (e.g., client-reported, care manager-indicated, and objectively determined) for ancillary services were more likely to receive ancillary services.

- Clients' mental health status and psychosocial functioning were significantly associated with their receipt of ancillary services.

- Treatment program characteristics (including the program's philosophy, treatment intensity, and manner of ancillary service coordination) positively affected the relationship between ancillary service receipt and client outcome from treatment.

H-1.3: OUTCOMES HANDOUT

What priority do you give the following outcomes?

- ▪ Please rank the following outcomes from 1 to 12 in order of their relative degree of importance to you.
- ▪ Use the rank of 1 for the most important goal and the rank of 12 for the least important goal.
- ▪ Do not assign the same number to more than one goal.

____ a. Physical health and physical well-being

____ b. Practical life skills (e.g. personal function, coping skills)

____ c. Basic education (e.g. literacy)

____ d. Job preparation/job presentation/job location

____ e. Social functioning (e.g. personal responsibility, ethics, communication)

____ f. Spiritual growth and spiritual well-being

____ g. Self-image, self-esteem and self-confidence

____ h. Self-insight, self-understanding and self-awareness (e.g. readiness for change)

____ i. Parenting skills

____ j. Mental health

____ k. Positive family functioning

____ l. Acquisition of stable housing